# Case 21-10469-KCF Doc 1 Filed 01/21/21 Entered 01/21/21 08:51:00 Desc Main Document Page 1 of 63

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	James First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Shivey	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9901	

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Debtor 1 James J Shivey Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EIN	EIN		
5.	Where you live	175 Pennsylvania Way	If Debtor 2 lives at a different address:		
		North Brunswick, NJ 08902  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Middlesex	Trumbol, Greek, Grey, Grate & Zir Gode		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 James J Shivey Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.				
	choosing to file under	_	napter 7			
			napter 11			
			napter 12			
			napter 13			
В.	B. How you will pay the fee		about how yo	u may pay. Ту <mark>ր</mark> attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with
					stallments. If you choose this option to (Official Form 103A).	on, sign and attach the Application for Individuals to Pay
			I request that but is not req	t my fee be wa uired to, waive	aived (You may request this option your fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line tha a installments). If you choose this option, you must fill out
						ial Form 103B) and file it with your petition.
).	Have you filed for bankruptcy within the	■ No				
	last 8 years?	☐ Ye	s. District		When	Case number
			District		When When	Coco number
			District		When	Case number  Case number
			2.661			
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.			
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your residence?	■ No	Go to I	ne 12.		
		☐ Ye	s. Has yo	ur landlord obta	ained an eviction judgment agains	t you?
				No. Go to line	12.	
				Voc Eill out In	sitial Statement About an Eviction	Judgment Against You (Form 101A) and file it as part of

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Case number (if known) Debtor 1 James J Shivey Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

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Debtor 1 James J Shivey Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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DCD	Jailles J Silivey							
Part	6: Answer These Questi	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  ☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	that are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. (	Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		rou estimate that after any exempt prop ble to distribute to unsecured creditors?	erty is excluded and administrative expenses			
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	<b>\$100,0</b>	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	<b>\$100,0</b>	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Part	7: Sign Below							
For	you	If I have of United St United St If no attordocumen I request I understabankrupte and 3571 /s/ James Signature	chosen to file under Chapter 7, I a ates Code. I understand the relief rney represents me and I did not pt, I have obtained and read the not relief in accordance with the chapter and making a false statement, corey case can result in fines up to \$2 to \$2 to \$3 to \$4 to \$4 to \$4 to \$4 to \$5 to \$5 to \$5 to \$5 to \$6 to	f available under each chapter, and I chapter of a variable under each chapter, and I chapter of a variable variable of the chapter of title 11, United States Code, specific property, or obtaining money of 250,000, or imprisonment for up to 20 y	under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.  It an attorney to help me fill out this cified in this petition.  or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Executed	MM / DD / YYYY	Executed on MM	/ DD / YYYY			

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Debtor 1 Jame	s J Shivey	Case number (if known)	
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Yakov Rudikh	Date	January 21, 2021
Signature of Attorney for Debtor		MM / DD / YYYY
Yakov Rudikh 001652007 Printed name		
Rudikh & Associates, LLC		
223 Route 18 South, Suite 204 East Brunswick, NJ 08816		
Number, Street, City, State & ZIP Code		
Contact phone (732) 659-6961	Email address	rudikhlawgroup@gmail.com
001652007 NJ		
Bar number & State		

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Fill in this infor	mation to identify your	case:		
Debtor 1	James J Shivey			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSI	ΞΥ	
Case number (if known)				
(II KHOWH)				

#### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
			nssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	166,410.90
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,011.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	172,421.90
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	158,052.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	21,014.01
	Your total liabilities	\$	179,066.01
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,818.15
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,685.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 James J Shivey Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

\$\_\_\_\_6,263.14

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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				Doc	ument	Page 10 of 6	3				
Fill in this	s information to	identify you	ur case and th	is filing	j:						
Debtor 1	Jame	s J Shive	ı								
20010	First Nan		Middle	Name		Last Name					
Debtor 2 (Spouse, if fili	ing) First Nan	200	Middle	Name		Last Name					
	<b>5</b> /					Last Name					
United Sta	ates Bankruptcy C	Court for the	: DISTRICT	JF NEV	VJERSEY						
Case num	ber										Check if this is an
											amended filing
<u>Officia</u>	<u>ll Form 10</u>	<u>6A/B</u>									
Sche	dule A/E	3: Pro	perty								12/15
						If an asset fits in more the ple are filing together, b					
	. If more space is a rv question.	needed, atta	ch a separate sh	eet to th	nis form. On	the top of any additiona	ıl pages, v	vrite your n	ame and cas	e nun	nber (if known).
	, ,	lamas Duildi		D l	F-4-4- V	O !! !	la.				
Part 1: De	escribe Each Resid	ience, Build	ng, Land, or Oti	ier Keai	Estate You	Own or Have an Interest	in				
. Do you o	own or have any le	gal or equita	ble interest in a	ny resid	ence, buildin	ng, land, or similar prope	erty?				
□ No. G	o to Part 2.										
Yes.	Where is the proper	ty?									
1.1				What	is the prope	rty? Check all that apply					
	Pennsylvania address, if available, o		on.		Single-famil	ly home					or exemptions. Put ms on Schedule D:
Sileet	address, ii avaliable, o	r otner descripti	OII		•	nulti-unit building 			Who Have Claims Secured by		
					Condominiu	ım or cooperative					
					Manufacture	ed or mobile home		Current va	lue of the	Cu	rrent value of the
-	th Brunswick		8902-0000		Land			entire prop	•	ро	rtion you own?
City		State	ZIP Code		Investment Timeshare	property	-	\$16	66,410.90		\$166,410.90
					Other			Describe the nature of your ownership in (such as fee simple, tenancy by the entire			
				Who	has an intere	est in the property? Chec	ck one		e), if known.	unoy	by the enthodes, e.
					Debtor 1 on	ly	-				
	dlesex					•					
County	<i>y</i>					d Debtor 2 only			if this is com	nmun	ity property
				Othor		of the debtors and another you wish to add about			structions)		
						ation number:	uns nem,	Sucii as io	Cai		
				184,	901 - 10%	cost of sale					
O A al al 41	ha dallar valua a	f the newtic	m wan and fa	u all af		o from Dort 1 includir		ntrica for			
						s from Part 1, includir			=>		\$166,410.90
	-										

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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■ No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

☐ Yes. Describe.....

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Debtor 1 James J Shivey Case number (if known)

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

11. <b>Clothes</b> <i>Examples</i> □ No	: Everyday clothes, furs, leather coats,	designer wear, shoes, accessories	
Yes. De	escribe		
	Clothing		\$500.00
12. <b>Jewelry</b> Examples ■ No □ Yes. De		ngagement rings, wedding rings, heirloom jewelry, watches, gems	, gold, silver
■ No	: Dogs, cats, birds, horses		
☐ Yes. De		did not already list, including any health aids you did not list	
■ No	ve specific information		
	dollar value of all of your entries fro 3. Write that number here	m Part 3, including any entries for pages you have attached	\$5,500.00
Part 4: Descri	be Your Financial Assets		
Do you own o	or have any legal or equitable interes	st in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	:: Money you have in your wallet, in you	ur home, in a safe deposit box, and on hand when you file your pet	ition
		U.S. Currency	\$50.00
·	: Checking, savings, or other financial	accounts; certificates of deposit; shares in credit unions, brokerage unts with the same institution, list each.	e houses, and other similar
□ No ■ Yes		Institution name:	
	17.1.	Checking and savings account at Chime	\$5.00
	utual funds, or publicly traded stock :: Bond funds, investment accounts with	ks h brokerage firms, money market accounts	
☐ Yes	Institution or iss	suer name:	
19. <b>Non-publi</b> joint vent ■ No	-	orporated and unincorporated businesses, including an intere	est in an LLC, partnership, and
	ve specific information about them Name of entity:		
		negotiable and non-negotiable instruments . cashiers' checks, promissory notes, and money orders.	

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

Non-negotiable instruments are those you cannot transfer to some

Case 21-10469-KCF Doc 1 Filed 01/21/21 Entered 01/21/21 08:51:00 Document Page 13 of 63 Debtor 1 Case number (if known) James J Shivey ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security

benefits; unpaid loans you made to someone else

Schedule A/B: Property

Beneficiary:

■ No

☐ Yes. Give specific information..

#### 31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

■ No

Official Form 106A/B

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Surrender or refund

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Debtor 1 James J Shivey Case number (if known) value:

	value:
<ul> <li>32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to recommend someone has died. ■ No □ Yes. Give specific information</li> </ul>	ceive property because
33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue  ■ No □ Yes. Describe each claim	
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights t  ■ No □ Yes. Describe each claim	o set off claims
35. Any financial assets you did not already list  ■ No □ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$55.00
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property?	
No. Go to Part 6.	
☐ Yes. Go to line 38.	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  ■ No. Go to Part 7.	
☐ Yes. Go to line 47.	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  ■ No	
☐ Yes. Give specific information	
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1 Case number (if known) James J Shivey List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 ..... \$166,410.90 Part 2: Total vehicles, line 5 56. \$456.00 Part 3: Total personal and household items, line 15 57. \$5,500.00 58. Part 4: Total financial assets, line 36 \$55.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Copy personal property total Total personal property. Add lines 56 through 61... \$6,011.00 62. \$6,011.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$172,421.90

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this information to identify your case:						
Debtor 1	James J Shivey					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY				
Case number						
(if known)				☐ Check if this is an amended filing		

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from	Amount of the exemption you claim		Specific laws that allow exemption			
		Schedule A/B	Crie	eck only one box for each exemption.				
	175 Pennsylvania Way North Brunswick, NJ 08902 Middlesex	\$166,410.90		\$8,358.90	11 U.S.C. § 522(d)(1)			
	County 184,901 - 10% cost of sale Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit				
	2005 Jeep Liberty 160,000 miles Line from Schedule A/B: 3.1	\$456.00		\$456.00	11 U.S.C. § 522(d)(2)			
	Line Holli Schedule Arb. 3.1		☐ 100% of fair market value, up to any applicable statutory limit					
	Household Goods and Furnishings Line from Schedule A/B: 6.1	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)			
	Elle Holli Golledale 775. GT			100% of fair market value, up to any applicable statutory limit				
	Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)			
	Elle Holli Genedale 745. TTT			100% of fair market value, up to any applicable statutory limit				
	U.S. Currency Line from Schedule A/B: 16.1	\$50.00	<b>s</b> 50.00		11 U.S.C. § 522(d)(5)			
	Line from Soffedule A/D. 19.1			100% of fair market value, up to any applicable statutory limit				

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Debtor	James J Shivey		Case number (if known	·		
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption		
		Copy the value from Check only one box for each exemption. Schedule A/B				
	hecking and savings account at hime	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)	
	ne from <i>Schedule A/B</i> : <b>17.1</b>		☐ 100% of fair market value, up to any applicable statutory limit			
	re you claiming a homestead exemption Subject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)	
	No					
	<ul><li>Yes. Did you acquire the property cove</li><li>No</li></ul>	ered by the exemption wi	thin 1	,215 days before you filed this case	?	

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Fill in this informati	ion to identify you	ur case:				
Debtor 1	James J Shivey	,				
_	First Name	Middle Name	Last Name			
Debtor 2	First Name	Middle Nege	Loot Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankru	uptcy Court for the	: DISTRICT OF NEW JERSEY				
Case number					☐ Check	if this is an
					ameno	led filing
Official Form 1	106D					
	<del></del>	s Who Have Claims	Sacurad	by Proport	\	40/45
Schedule D	Creditors	S Who Have Claims	Secured	by Propert	у	12/15
		If two married people are filing togeth out, number the entries, and attach it				
1. Do any creditors hav	e claims secured b	y your property?				
☐ No. Check thi	s box and submit t	this form to the court with your other	schedules. You	u have nothing else t	o report on this form.	
■ Yes. Fill in all	of the information	below.		-	·	
Part 1: List All So	ecured Claims					
		more than one secured claim, list the cre	ditor separately	Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Midland Mtg	/midfirst	Describe the property that secures t	the claim:	value of collateral. \$158,052.00	claim \$166,410.90	If any <b>\$0.00</b>
Creditor's Name		175 Pennsylvania Way North		<del>                                      </del>	<del></del>	
		Brunswick, NJ 08902 Middle	esex			
		County				
Dala accoso		184,901 - 10% cost of sale As of the date you file, the claim is:	Check all that			
Pob 268959 Oklahoma C	ity, OK 73126	apply.	-,			
Number, Street, City		☐ Contingent☐ Unliquidated				
rvambor, otroot, only	y, Oldio a Zip Oodo	☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as i	mortgage or secu	ıred		
Debtor 2 only		car loan)				
Debtor 1 and Debtor	r 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
☐ At least one of the d	lebtors and another	☐ Judgment lien from a lawsuit	_			
☐ Check if this claim relates to a community debt		Other (including a right to offset)  Mortgage				
	Opened					
	12/16 Last					
But like 1	Active	Local Both	<sub>ber</sub> 2269			
Date debt was incurre	12/02/19	Last 4 digits of account numl	ber <u></u> <b>2209</b>			
Add the deller velve	of your ontrine i- C	Column A on this page. Write that num	hor hore:	\$4E0.05	2 00	
Add the dollar value	or your entries in C	Joiunni A on this page. Write that hum	net tiete:	\$158,05	) <b>Z.U</b> U	

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$158,052.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 19	9 of 63	
Fill in this	information to identify your	case:			
Debtor 1	James J Shivey				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case numb (if known)	oer				Check if this is an
,				"	amended filing
					J. T. T. T. J.
Official	Form 106E/F				
Schedu	Ile E/F: Creditors W	ho Have Unsecured	Claims		12/15
Schedule G: Schedule D: eft. Attach to name and ca	Executory Contracts and Unexp Creditors Who Have Claims Sec he Continuation Page to this pag ase number (if known).	ired Leases (Official Form 106G). D ured by Property. If more space is I le. If you have no information to rep	o not include needed, copy t	ontracts on Schedule A/B: Property (Oi any creditors with partially secured clai the Part you need, fill it out, number the do not file that Part. On the top of any a	ims that are listed in entries in the
	List All of Your PRIORITY Un creditors have priority unsecure				
_ `	Go to Part 2.	u ciaiiis agaiist you?			
☐ Yes.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
	creditors have nonpriority unsec				
		art. Submit this form to the court with	vour other sche	edubes	
_		art. Cubinit and form to the court with	your outlor don't	adico.	
Yes.					
unsecur	ed claim, list the creditor separately	y for each claim. For each claim listed	, identify what t	holds each claim. If a creditor has more ype of claim it is. Do not list claims already three nonpriority unsecured claims fill out	/ included in Part 1. If more
					Total claim
4.1 <b>C</b> a	pital One	Last 4 digits of acc	ount number	1001	\$8,070.00
No	npriority Creditor's Name				
15	000 Capital One Dr	When we the debt	in a company of O	Opened 02/16 Last Active	
Ri	chmond, VA 23238	When was the debt	incurred?	7/12/18	
Nu	mber Street City State Zip Code	As of the date you t	file, the claim i	s: Check all that apply	
Wh	no incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and and	other Type of NONPRIOR	ITY unsecured	d claim:	
	Check if this claim is for a comm	munity			
del	bt the claim subject to offset?			ration agreement or divorce that you did n	ot
	No	report as priority clair		g plans, and other similar debts	
		_	or pront-snalli	y piano, and other sillillal debts	
Ц	Yes	Other. Specify			

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DCDIO	James J Shivey			
4.2	Commonwealth Financial Nonpriority Creditor's Name	Last 4 digits of account number	31N1	\$656.00
	245 Main Street Scranton, PA 18519 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 07/20 Last Active 05/16	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	·	Attornev Southern Bank	
4.3	Financial Recoveries Nonpriority Creditor's Name	Last 4 digits of account number	3617	\$474.00
	200 East Park Drive Mount Laurel, NJ 08054	When was the debt incurred?	Opened 07/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify	Attorney Rutgers R W J M G Me	
4.4	Financial Recoveries	Last 4 digits of account number	3615	\$378.00
	Nonpriority Creditor's Name 200 East Park Drive Mount Laurel, NJ 08054	When was the debt incurred?	Opened 02/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Collection A  Other. Specify Emergency	Attorney Rutgers R W J M G	

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Debtor	1 James J Shivey		Case number (if known)	
4.5	Financial Recoveries	Last 4 digits of account number	3616	\$378.00
	Nonpriority Creditor's Name 200 East Park Drive	When was the debt incurred?	Opened 02/18	
	Mount Laurel, NJ 08054  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	7.5 of the date you me, the claim.	o. Oncox all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Emergency	Attorney Rutgers R W J M G Me	
4.6	Financial Recoveries	Last 4 digits of account number	6899	\$378.00
	Nonpriority Creditor's Name 200 East Park Drive Mount Laurel, NJ 08054	When was the debt incurred?	Opened 07/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Collection Definition Defi	Attorney Rutgers R W J M G Me	
4.7	Financial Recoveries	Last 4 digits of account number	3915	\$202.00
	Nonpriority Creditor's Name 200 East Park Drive Mount Laurel, NJ 08054	When was the debt incurred?	Opened 06/17	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Collection A Other Specify Fmergency	Attorney Rutgers R W J M G	

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Debt	or 1 James J Shivey			
4.8	Financial Recoveries  Nonpriority Creditor's Name	Last 4 digits of account number	3916	\$202.00
	200 East Park Drive Mount Laurel, NJ 08054	When was the debt incurred?	Opened 06/17	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Emergency	Attorney Rutgers R W J M G   Me	
4.9	Jefferson Capital Syst	Last 4 digits of account number	7003	\$614.00
	Nonpriority Creditor's Name  16 McIeland Rd Saint Cloud, MN 56303	When was the debt incurred?	Opened 11/19 Last Active 02/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Factoring (	Company Account Platinum Mc	
4.1 0	Lvnv Funding Llc	Last 4 digits of account number	7103	\$1,458.00
	Nonpriority Creditor's Name Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 02/19 Last Active 07/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other Specify		

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1 James J Shivey	Case number (if known)	
Lvnv Funding Llc	Last 4 digits of account number 2020	Unknowr
Nonpriority Creditor's Name		
Po Box 10497 Greenville, SC 29603	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
MidFirst Bank	Last 4 digits of account number 5620	Unknowr
Nonpriority Creditor's Name	Last 4 digits of account number ————————————————————————————————————	Olikilowi
999 N.W. Grand Blvd Suite 100 Oklahoma City, OK 73118	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Motion Federal Credit Union	Last 4 digits of account number 5518	Unknown
Nonpriority Creditor's Name	- William and a late to a see 10	
PO Box 1160 Linden, NJ 07036	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other Specify	

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James J Shivey		Case number (if known)	
Motion Federal Cu	Last 4 digits of account number	3801	\$6,401.00
Nonpriority Creditor's Name 360 N Wood Ave Linden, NJ 07036	When was the debt incurred?	Opened 12/15 Last Active 10/17	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Unsecured		
Motion Federal Cu Nonpriority Creditor's Name	Last 4 digits of account number	3809	\$403.00
360 N Wood Ave Linden, NJ 07036	When was the debt incurred?	Opened 12/15 Last Active 12/30/17	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$oldsymbol{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
Yes	Other. Specify Deposit Re	lated	
North Brunswick Township	Last 4 digits of account number	6350	Unknowr
Nonphonity Creditors Name 710 Hermann Rd North Brunswick, NJ 08902	When was the debt incurred?		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	<ul> <li>Obligations arising out of a separeport as priority claims</li> </ul>	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
= No □ Yes	Other Specify		
<b>L</b> 153	Utner Specify		

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James J Shivey	Case number (if known)	
Princeton Orthopaedic	Last 4 digits of account number 6266	\$168.78
Nonpriority Creditor's Name PO Box 45702	When was the debt incurred?	<u>.</u>
Baltimore, MD 21297		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
PSE&G	Last 4 digits of account number 4606	\$1,231.2
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ.,=σ.:=
PO BOX 14444	When was the debt incurred?	
New Brunswick, NJ 08906-4444	As of the date were file the plaint in O	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
_	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community		
s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Society Hill North Condo		
Association Inc	Last 4 digits of account number 4719	Unknowr
Nonpriority Creditor's Name  1 Society Hill Way	When was the debt incurred?	
North Brunswick, NJ 08902  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date you me, the ordinate. Onesk an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ Debtor Fand Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans	
⊒ Check if this claim is for a community lebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
T Yes	Other Specify	

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Debtor 1 James J Shivey

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Case number (if known)

Wells Fargo
Nonporjority Creditor's Name

Last 4 digits of account number
Unknown

Wells Fargo	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 101 North Phillips Avenue	When was the debt incurred?	
Sioux Falls, SD 57104 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify OVERDRAFT FEES	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 21,014.01
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 21,014.01

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Fill in this infor	mation to identify your	case:		
Debtor 1	James J Shivey			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JER	SEY	
Case number				
(if known)				

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	<del>-</del>

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		Docume	nt Page 28 C	03	
Fill in this	information to identify your	case:			
Debtor 1	James J Shivey First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
I Inited Sta	tes Bankruptcy Court for the:	DISTRICT OF NEW JE	RSFY		
Offica Ota	ico Bariki aptoy Gourt for the.	DIGITATO OF NEW CE	1021		
Case numb	ber				
(if known)					☐ Check if this is an
					amended filing
Official	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
■ No □ Yes	you have any codebtors? (If  bin the last 8 years, have you a, California, Idaho, Louisiana	ı lived in a community pı	roperty state or territo	ry? (Community propert	
☐ Yes  3. In Colin line	e 2 again as a codebtor only i	ors. Do not include your f that person is a guaran	spouse as a codebto	sure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
out Co	olumn 2.				
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	Δ.
	Name			□ Schedule E/F, I	
				☐ Schedule G, lin	
_	N. I. O. I				
	Number Street City	State	ZIP Code		
	o.i,	Ciaic	2 0000		
				_	
3.2				Schedule D, lin	
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	e
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to	o identify your ca	ase:				ı				
	btor 1	James J Shi									
	btor 2 buse, if filing)					_					
Uni	ited States Bankrup	tcy Court for the	: DISTRICT OF NEW J	ERSEY							
(If kr	se number						☐ An		nt showin	g postpetition ollowing date:	chapter
	fficial Form						MM	1 / DD/ Y	YYY		
S	chedule I: `	Your Inc	ome								12/15
sup spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you parated and you et to this form.	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and you th you, do not incl	r spouse ude infor	is liv mati	ing with yo on about y	ou, inclu our spo	ide inforn use. If mo	nation about ore space is	your needed,
١.	information.	oyinent .		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more attach a separate		Employment status	Employed				☐ Emplo	•		
	information about		. ,	☐ Not employed			[	☐ Not er	nployed		
	employers.		Occupation	Driver							
	Include part-time, self-employed wo		Employer's name	Stone Hill Tran	nsportati	on I	nc				
	Occupation may in or homemaker, if		Employer's address	330 Mounts Co 223 Freehold, NJ 0		ve S	Ste				
			How long employed the	here? 1 mon	ıth						
Pai	rt 2: Give Det	tails About Mor	nthly Income								
Esti		ome as of the da	ate you file this form. If y	you have nothing to	report for	any	line, write \$	60 in the	space. Inc	clude your nor	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co this form.	ombine the informati	on for all	emplo	oyers for th	at perso	n on the li	nes below. If y	ou need
							For Debte	or 1		otor 2 or ng spouse	
2.			ry, and commissions (be calculate what the monthl		2.	\$	6,2	63.14	\$	N/A	
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	6,263	3.14	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	James J Shivey	-	С	ase number (if known)				
					For Debtor 1	F	or Debtor	2 or	
						_	on-filing s	pouse	
	Copy	y line 4 here	4.		\$ 6,263.14	- \$		N/A	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 1,138.93	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$ 0.00	_		N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$ 0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.		\$ 0.00	\$		N/A	
	5e.	Insurance	5e.		\$	_		N/A	
	5f.	Domestic support obligations	5f.		\$0.00			N/A	
	5g.	Union dues	5g.		\$ 0.00	_		N/A	
	5h.	Other deductions. Specify: NJ State Tax	_ 5h.		\$ 253.11			N/A	
		SUI	_		\$ 36.66 \$ 16.29			N/A	
		SDI	_			- \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$1,444.99	- \$		N/A	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	\$ 4,818.15	\$		N/A	
8.	List a	all other income regularly received:  Net income from rental property and from operating a business,							
	oa.	profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total	_			•			
	٥L	monthly net income.	8a.		\$ 0.00	_		N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.		\$	- \$		N/A	
	oc.	regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c.		\$	_		N/A	
	8d.	Unemployment compensation	8d.		\$0.00	_		N/A	
	8e.	Social Security	8e.		\$0.00	_ \$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance							
		that you receive, such as food stamps (benefits under the Supplemental							
		Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.		\$	_		N/A	
	8g.	Pension or retirement income	8g.		\$0.00			N/A	
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$ 0.00	_ + \$		N/A	
•	A .I.I	all athers because Add Page One Obs One Ods One Of One Ob	0	•				N1/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		N/A	<u>\</u>
10	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$	4,818.15 +		N/A	= \$	4 040 4F
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_	4,010.15		IN/A		4,818.15
		5 .	<u>.</u> ∟						
11.		e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your		nde	ents vour roommate	es an	d		
		r friends or relatives.	асро	, i i u u	into, your roominat	, an	u		
		ot include any amounts already included in lines 2-10 or amounts that are not a	availa	able	to pay expenses lis	sted in			
	Spec	ify:					11.	+\$	0.00
10	اداد ۸	the amount in the last column of line 10 to the amount in line 11. The resi	ult in	th a	combined monthly	inco-	20		
12.		e that amount in the last column of line to to the amount in line 11. The resi							
	appli	·				,	12.	\$	4,818.15
								Combin	ed
									/ income
13.	Do y	ou expect an increase or decrease within the year after you file this form	?						
		No.							
		Yes. Explain: Debtor does not expect any change at this mome	ent.						

Fill	in this information to identify your case:				
Deb	otor 1 James J Shivey	C	heck if this i	s:	
	otor 2 ouse, if filing)		_ ] A supple		g postpetition chapter e following date:
``	ted States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			O / YYYY	
			IVIIVI / DE	,, , , , , , ,	
1	se numbernown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are fil ormation. If more space is needed, attach another sheet to this forn mber (if known). Answer every question.				
Par	Tt 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household? □ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for	Separate Household of [	Debtor 2.		
2.	Do you have dependents? ■ No				
		ependent's relationship to bebtor 1 or Debtor 2	Depe age	endent's	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes ☐ No
	_				Yes
					□ No □ Yes
	_				□ Yes
	_				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est exp	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you appears as of a date after the bankruptcy is filed. If this is a supplemplicable date.				
the	elude expenses paid for with non-cash government assistance if your value of such assistance and have included it on <i>Schedule I: Your</i> ificial Form 106I.)			Your expens	ses
4.	The rental or home ownership expenses for your residence. Inclupayments and any rent for the ground or lot.	de first mortgage	. \$		1,300.00
	If not included in line 4:				
	4a. Real estate taxes	4a	ı. <b>\$</b>		0.00
	4b. Property, homeowner's, or renter's insurance	4b	. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		:. \$		350.00
5.	4d. Homeowner's association or condominium dues  Additional mortgage payments for your residence, such as home of		l. \$ 5. \$		260.00 0.00

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Debtor 1 Jam	es J Shivey	Case num	ber (if known)	
. Utilities:				
	ricity, heat, natural gas	6a.	\$	250.00
	r, sewer, garbage collection	6b.		0.00
	phone, cell phone, Internet, satellite, and cable services	6c.	\$	350.00
	r. Specify:	6d.	\$	0.00
	nousekeeping supplies	7.	\$	700.00
	and children's education costs	8.	\$	0.00
	aundry, and dry cleaning	9.	\$	250.00
	are products and services	10.	\$	250.00
	d dental expenses	11.	\$	150.00
	tion. Include gas, maintenance, bus or train fare.	• • • • • • • • • • • • • • • • • • • •	Ψ	130.00
•	ide car payments.	12.	\$	300.00
	ent, clubs, recreation, newspapers, magazines, and books	13.	\$	300.00
	contributions and religious donations	14.	\$	50.00
Insurance.			· —	
Do not inclu	ide insurance deducted from your pay or included in lines 4 or 20.			
15a. Life ir	nsurance	15a.	\$	0.00
15b. Healt	h insurance	15b.	\$	0.00
15c. Vehic	cle insurance	15c.	\$	175.00
15d. Other	r insurance. Specify:	15d.	\$	0.00
Taxes. Do r	not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	, , ,	16.	\$	0.00
Installment	or lease payments:			
17a. Car p	ayments for Vehicle 1	17a.	\$	0.00
17b. Car p	ayments for Vehicle 2	17b.	\$	0.00
17c. Other	r. Specify:	17c.	\$	0.00
17d. Other	r. Specify:	17d.	\$	0.00
Your paym	ents of alimony, maintenance, and support that you did not report	as	_	
	rom your pay on line 5, Schedule I, Your Income (Official Form 106	il). 18.	·	0.00
Other payn	nents you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	property expenses not included in lines 4 or 5 of this form or on Se			
20a. Morto	gages on other property	20a.	\$	0.00
20b. Real	estate taxes	20b.	\$	0.00
	erty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maint	tenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Home	eowner's association or condominium dues	20e.	\$	0.00
. Other: Spe	cify:	21.	+\$	0.00
•	our monthly expenses		•	4 00 - 00
	nes 4 through 21.	•	\$	4,685.00
	ine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2	\$	
22c. Add lin	e 22a and 22b. The result is your monthly expenses.		\$	4,685.00
Calculate v	our monthly net income.			
	line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,818.15
	your monthly expenses from line 22c above.	23b.		
zou. Copy	your monthly expenses nominate 220 above.	۷۵۵.	-ψ	4,685.00
23c Subtr	act your monthly expenses from your monthly income.			
	esult is your <i>monthly net income</i> .	23c.	\$	133.15
1110 1	could be your monany not income.		<u> </u>	
For example,	do you expect to finish paying for your car loan within the year or do you expect to the terms of your mortgage?			e or decrease because
П Уес	Explain here:			

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Fill in this info	rmation to identify your	case:			
Debtor 1	James J Shivey				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Maidalla Nassa	LastNama		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	DISTRICT OF NEW JERSE	Y		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Daa				
	<u>m 106Dec</u>				
Declara	tion About a	ın Individual D	ebtor's Sch	edules	12/15
years, or both.	ey or property by fraud i 18 U.S.C. §§ 152, 1341, 1 gn Below	n connection with a bankrup 519, and 3571.	tcy case can result in t	ines up to \$250,000, or	imprisonment for up to 20
Did you p	ay or agree to pay some	one who is NOT an attorney	to help you fill out ban	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				cy Petition Preparer's Notice,
				Declaration, and	Signature (Official Form 119)
•	alty of perjury, I declare re true and correct.	that I have read the summar	y and schedules filed v	with this declaration an	d
X /s/ Jai	mes J Shivey		X		
	s J Shivey		Signature of De	ebtor 2	
Signati	ure of Debtor 1				

Date

Date **January 21, 2021** 

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Fill	in this inform	nation to identify you	r case:						
	otor 1		duodi						
Dei	JUI I	James J Shivey First Name	Middle Name	Last Name					
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name					
Uni	ted States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERS	SEY					
	se number				_	theck if this is an mended filing			
Sta Be a info	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write you				
Pai	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before					
1.	What is you	r current marital statu	s?						
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried							
2.	During the la	ring the last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. Lis	■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there			
<b>3.</b> state					ity property state or territory ico, Texas, Washington and W				
		·	nedule H: Your Codebtors (O	fficial Form 106H).					
Pai	t 2 Explai	n the Sources of You	r Income						
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?			
	□ No ■ Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
	last calenda nuary 1 to De	r year: ecember 31, 2020 )	■ Wages, commissions, bonuses, tips	\$20,000.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

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ebtor 1 .			Document	Page 35 of 63				
	lames J Shive	y		Case	e number (if known)			
			Debtor 1			Debtor 2		
		Sources	of income that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
For the calendar year before that: January 1 to December 31, 2019)			s, commissions, tips	\$50,362.00	\$50,362.00			
		☐ Opera	iting a business		☐ Operating a	business		
Include in and other winnings  List each	income regardles er public benefit p s. If you are filing	s of whether that inco payments; pensions; r a joint case and you	ome is taxable. Examplental income; interest have income that you	evious calendar years? bles of other income are a ; dividends; money collec received together, list it c . Do not include income the	ted from lawsuits; nly once under De	royalties; an ebtor 1.		
□ No ■ Yes	s. Fill in the detai	ls.						
		Debtor 1 Sources Describe	below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)	
	endar year: to December 31	Unempl	oyment	\$15,000.00				
Are eith □ No	Neither Debt	or 1 nor Debtor 2 ha	rimarily consumer de as primarily consume family, or household p	er debts. Consumer debts	s are defined in 11	U.S.C. § 10	1(8) as "incurred by a	
	□ No. (	days before you filed so to line 7.	d for bankruptcy, did you pay any creditor a total of \$6,825* or more?					
	p n	aid that creditor. Do rot include payments t	not include payments to an attorney for this	total of \$6,825* or more if for domestic support obligh bankruptcy case. Iter that for cases filed on	ations, such as ch	ild support a	ind alimony. Also, do	
■ Yes	S. Debtor 1 or I	Debtor 2 or both hav days before you filed		er debts. ou pay any creditor a tota	l of \$600 or more?			
■ Yes	During the 90				l of \$600 or more?			
■ Ye:	Debtor 1 or I  During the 90  No. C  Yes L  ii	days before you filed so to line 7. ist below each credito	I for bankruptcy, did y or to whom you paid a domestic support oblig		the total amount	you paid tha		
	Debtor 1 or I  During the 90  No. C  Yes L  ii	days before you filed to to line 7. ist below each credito nclude payments for c ttorney for this bankru	I for bankruptcy, did y or to whom you paid a domestic support oblig	ou pay any creditor a tota total of \$600 or more and	the total amount	you paid tha Also, do not		

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

**Total amount** 

paid

Amount you

still owe

**Dates of payment** 

**Insider's Name and Address** 

page 2

Reason for this payment

Deb	Case 21-10469-KCF Doc		Page 36 of 63	./21/21 08:5	51:00 De	esc Main			
	insider? Include payments on debts guaranteed or cos	signed by an insider.							
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name			
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures							
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.								
	□ No								
	Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency St		Status of th	Status of the case			
	Society Hill North Condominium Association Inc. vs James Shivey F-21147-19	Collection	Middlesex County Chancery Division P.O. Box 971 Trenton, NJ 08625		☐ Pending ☐ On appeal ☐ Concluded				
					Judgment	\$Unknown			
	Motion Federal Credit Union vs James J Shivey DC-009155-18	Collection	Middlesex County Special Civil Part P.O. Box 1146 New Brunswick, NJ		☐ Pending ☐ On appeal ☐ Concluded				
			08903-0964		Judgment	\$Unknown			
	MidFirst Bank vs James Shivey F-000956-20	Collection	Middlesex County Chancery Division P.O. Box 971 Trenton, NJ 08625		☐ Pending☐ On appe☐ Conclude				
			Trenton, No ooo			\$Unknown			
	LVNV Funding LLC, Successor in Interest [Credit One Bank, N.A., Original Creditor] vs James Shivey	Collection	Middlesex County Special Civil Part P.O. Box 1146 New Brunswick, NJ 08903-0964		☐ Pending ☐ On appe ☐ Conclude				
	DC-009820-20				Judgment \$1459				
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below.  No. Go to line 11.		perty repossessed, fo	reclosed, garnis	shed, attached	l, seized, or levied?			
	☐ Yes. Fill in the information below.								
	Creditor Name and Address	Describe the Property		Date		Value of the property			
		Explain what happene	ed						
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed		cluding a bank or fina	ancial institutior	n, set off any a	mounts from your			

☐ Yes. Fill in the details. **Creditor Name and Address** 

Describe the action the creditor took

Date action was taken

Amount

No

Case 21-10469-KCF Doc 1 Filed 01/21/21 Entered 01/21/21 08:51:00 Desc Main Page 37 of 63 Document Debtor 1 Case number (if known) James J Shivey 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You **Rudikh & Associates** 10/16/20 \$1,500.00 223 Route 18 S East Brunswick, NJ 08816 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 4

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Debtor 1 James J Shivey Case number (if known)

	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and v property transfer		paym	ribe any property or ents received or debts n exchange	Date transfer was made			
	Person's relationship to you								
19.	Within 10 years before you filed for bankrul beneficiary? (These are often called asset-pre No ☐ Yes. Fill in the details.		ny property to a	self-settle	d trust or similar device	of which you are a			
	Name of trust	Description and v	value of the pro	perty trans	sferred	Date Transfer was			
						made			
Pai	t 8: List of Certain Financial Accounts, In	struments, Safe Deposi	it Boxes, and St	orage Unit	ts				
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market,								
	houses, pension funds, cooperatives, asso  No  Yes. Fill in the details.	ciations, and other fina	ncial institution	s.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number			Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	r bankruptcy, ar	ny safe de <sub>l</sub>	posit box or other deposi	itory for securities,			
	No								
	☐ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents		Do you still have it?			
22.	Have you stored property in a storage unit	or place other than you	r home within 1	year befor	re you filed for bankrupto	cy?			
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?			
Pa	t 9: Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	lude any properi	ty you bor	rowed from, are storing f	or, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value			
Pai	t 10: Give Details About Environmental Inf	,							

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

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Debtor 1 James J Shivey Case number (if known)

	regu	lations controlling the cleanup of thes	e sub	stances, wastes, or material.						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.									
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.									
Rep	ort a	II notices, releases, and proceedings th	at yo	u know about, regardless of wher	the	ey occurred.				
24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
		No Yes. Fill in the details.								
		ne of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	t	Environmental law, if you know it	Date of notice			
25.	Hav	e you notified any governmental unit of	any	release of hazardous material?						
		No Yes. Fill in the details.								
		ne of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Hav	e you been a party in any judicial or ad	minis	trative proceeding under any envi	ron	mental law? Include settlements	and orders.			
		No Yes. Fill in the details.								
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Pai	t 11:	Give Details About Your Business or	Coni	nections to Any Business						
27.	With	nin 4 years before you filed for bankrup	tcy, c	lid you own a business or have an	y of	f the following connections to an	y business?			
		☐ A sole proprietor or self-employed	in a t	rade, profession, or other activity,	eith	ner full-time or part-time				
		☐ A member of a limited liability comp	pany	(LLC) or limited liability partnersh	ip (I	LLP)				
		☐ A partner in a partnership								
		An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
	No. None of the above applies. Go to Part 12.									
		Yes. Check all that apply above and fil			s.					
	Bus	siness Name	Des	scribe the nature of the business		Employer Identification number				
		dress nber, Street, City, State and ZIP Code)	Naı	ne of accountant or bookkeeper		Do not include Social Security  Dates business existed	number or ITIN.			
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, c	lid you give a financial statement t	to a	nyone about your business? Incl	ude all financial			
		No Yes. Fill in the details below.								
	⊔ Nar		Dat	e Issued						
	Add	dress nber, Street, City, State and ZIP Code)	Jai							

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known)

Debtor 1 James J Shivey with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ James J Shivey Signature of Debtor 2 James J Shivey Signature of Debtor 1 Date **Date January 21, 2021** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:			
Debtor 1	James J Shivey				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	kruptcy Court for the:	DISTRICT OF NE	W JERSEY		
Case number					
(if known)					Check if this is an amended filing
					amended ming
Official Fo	m 108				
		n for Indiv	iduals Filing Under (	Chanter 7	12/15
Otatemen	it or intentio	TI TOT IIIGIV	iduals i lillig Offaci (	Jiaptei 1	12/13
	vidual filing under cha	-	out this form if:		
_	claims secured by yo		-4t d		
You must file this	er is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by e time for cause. You must also send c		
	ople are filing togethe	r in a joint case, bo	th are equally responsible for supplyin	g correct information.	Both debtors must
	nd accurate as possib our name and case nur		needed, attach a separate sheet to thi	is form. On the top of a	ny additional pages,
Part 1: List Yo	ur Creditors Who Hav	e Secured Claims			
For any creditorinformation bel	•	art 1 of Schedule D	: Creditors Who Have Claims Secured	by Property (Official Fo	orm 106D), fill in the
Identify the cre	ditor and the property t	hat is collateral	What do you intend to do with the passecures a debt?		ou claim the property empt on Schedule C?
					_
Creditor's M	idland Mtg/midfirst		■ Surrender the property.	□ No	
name:			☐ Retain the property and redeem it.	<b>-</b> v	
Description of	175 Pennsylvania	Way North	Retain the property and enter into a Reaffirmation Agreement.	■ Ye	S
property	Brunswick, NJ 089 Middlesex County		☐ Retain the property and [explain]:		
securing debt:	184,901 - 10% cost				
Part 2: List Yo	ur Unexpired Persona	I Property Leases			
For any unexpire	d personal property le	ase that you listed	in Schedule G: Executory Contracts are expired leases are leases that are still		
			the trustee does not assume it. 11 U.S.		od nas not yet ended.
Describe your ur	nexpired personal pro	perty leases		Will the lea	ase be assumed?
Lessor's name:				□ No	
Description of lease	sed				
Property:				☐ Yes	
Lessor's name:				□ No	
Description of lease Property:	sed			☐ Yes	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Del	otor 1	James J Shivey	Case number (if known)
	sor's na		□ No
		of leased	_
PIC	perty:		☐ Yes
Les	sor's na	ame:	□ No
		of leased	
Pro	perty:		☐ Yes
	ssor's na		□ No
	scriptior perty:	of leased	☐ Yes
	po.ty.		□ res
	sor's na		□ No
		of leased	
FIC	perty:		☐ Yes
Les	sor's na	ame:	□ No
		of leased	
Pro	perty:		☐ Yes
Par	t 3:	Sign Below	
		alty of perjury, I declare that I have indicated r at is subject to an unexpired lease.	y intention about any property of my estate that secures a debt and any personal
X		mes J Shivey	X
		es J Shivey	Signature of Debtor 2
	Signa	ture of Debtor 1	
	Date	January 21, 2021	Date

Fill in this inf	ormation to identify your case:					rected in this form and	in Form
Debtor 1	James J Shivey		123	2A-1Su	ipp:		
Debtor 2 (Spouse, if filing)				□ 1. T	here is no presu	umption of abuse	
United State	s Bankruptcy Court for the: District of New Je	rsey		a	applies will be m	o determine if a presul nade under <i>Chapter</i> 7	
Case numbe	er			□ 3. T	he Means Test	cial Form 122A-2). does not apply now be service but it could ap	
						·	ріу іатег.
Official	Form 122A - 1				eck ii tilis is ai	n amended filing	
	r 7 Statement of Your Cu	rrent Moi	nthly Inc	om	Δ		04/20
attach a separ case number ( qualifying mili	e and accurate as possible. If two married people ate sheet to this form. Include the line number to vif known). If you believe that you are exempted fro tary service, complete and file Statement of Exemption Calculate Your Current Monthly Income	which the addition om a presumption	nal information a of abuse becau	applies. se you	On the top of an	y additional pages, wri narily consumer debts o	te your name and or because of
1. What is	s your marital and filing status? Check one or	 nly.					
	married. Fill out Column A, lines 2-11.	,					
	ried and your spouse is filing with you. Fill o	ut both Columns	A and B, lines	2-11.			
☐ Marı	ried and your spouse is NOT filing with you.	You and your s	spouse are:				
<u> </u>	iving in the same household and are not lega	_	_	lumns	A and B, lines 2	<u>-11.</u>	
р	iving separately or are legally separated. Fill lenalty of perjury that you and your spouse are lead on the common of the evadion of the evaluation o	legally separated	d under nonban	kruptcy	/ law that applie	s or that you and you	
101(10A). F the 6 month	average monthly income that you received from all For example, if you are filing on September 15, the 6-ms, add the income for all 6 months and divide the tota on the same rental property, put the income from that p	nonth period would I by 6. Fill in the re	l be March 1 throi sult. Do not includ	ugh Aug de any ir	ust 31. If the amo	unt of your monthly incon ore than once. For examp	ne varied during ble, if both
				Colun		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	6,263.14	\$	
3. Alimon	y <b>and maintenance payments.</b> Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from an and roo	ounts from any source which are regularly por your dependents, including child support a unmarried partner, members of your household mmates. Include regular contributions from a sp. Do not include payments you listed on line 3.	. Include regular d, your depende	r contributions nts, parents,	\$	0.00	\$	
5. Net inc	ome from operating a business, profession,						
			otor 1				
	eceipts (before all deductions)	\$ 0.00 -\$ 0.00					
	y and necessary operating expenses nthly income from a business, profession, or far		Copy here ->	\$	0.00	\$	
	ome from rental and other real property	m 2	оору пого и	Ψ			
0. 1401 1110	and and other roat property	Deb	otor 1				
Gross r	eceipts (before all deductions)	\$0.00					
Ordinar	y and necessary operating expenses	-\$ 0.00					
Net mo	nthly income from rental or other real property	\$0.00	Copy here ->	\$	0.00	\$	
7. Interes	t, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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James J Shivey Debtor 1 Case number (if known) Column A Column B Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below... 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 6.263.14 = \$ 6,263.14 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11\_\_\_\_\_ Copy line 11 here=> 6,263.14 Multiply by 12 (the number of months in a year) **x** 12 75,157.68 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 71,064.00 13 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. 14h Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ James J Shivey

James J Shivey Official Form 122A-1

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Debtor 1	James J Shivey	Case number (if known)	
	Signature of Debtor 1		
Da	Ate   January 21, 2021   MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	m.	

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Fill in this information to i	dentify your case:		heck the appropriate nes 40 or 42:	box as directed in
Debtor 1 James J S	Shivey	_		
Debtor 2 (Spouse, if filing)		_	According to the calcul Statement:	ations required by this
United States Bankruptcy Co	ourt for the: District of New Jersey		■ 1. There is no presu	ımption of abuse.
Case number		_	☐ 2. There is a presun	nption of abuse.
(if known)		_		
			Check if this is an an	nended filing
Official Form 122	<u>2A - 2</u>			
Chapter 7 Mean	s Test Calculation			04/19
To fill out this form, you wi	Il need your completed copy of Chapter 7 Staten	nent of Your Current M	onthly Income (Officia	I Form 122A-1).
space is needed, attach a s additional pages, write you	ate as possible. If two married people are filing to separate sheet to this form, Include the line numb r name and case number (if known). r Adjusted Income			
Copy your total curre	nt monthly income. Copy line 11	from Official Form 122	A-1 here=> \$	6,263.14
2. Did you fill out Colum	nn B in Part 1 of Form 122A-1?			
■ No. Fill in \$0 for th	e total on line 3.			
☐ Yes. Is your spouse	Filing with you?			
☐ No. Go to lir	ne 3.			
☐ Yes. Fill in \$0	0 for the total on line 3.			
	nonthly income by subtracting any part of your s of you or your dependents. Follow these steps:	pouse's income not us	ed to pay for the	
On line 11, Column B of expenses of you or you	of Form 122A–1, was any amount of the income you ir dependents?	reported for your spouse	NOT regularly used fo	or the household
■ No. Fill in 0 for the	total on line 3			
☐ Yes. Fill in the infor				
	oose for which the income was used	Fill in the amoun		
	e income is used to pay your spouse's tax debt or to an you or your dependents.	your spouse's in		
	,	\$		
		_	-	
		_ \$	_	
		\$		
		0.00	-	
Total.		\$	-	
			Copy total here=>	- \$0.00
4. Adjust your current m	nonthly income. Subtract line 3 from line 1.			\$6,263.14_

Official Form 122A-2

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	Docui		41 01 03			
Debtor 1	James J Shivey		Case number	(if known)		
Part 2:	Calculate Your Deductions from Your Income					
to ans instru Deduc your a	Internal Revenue Service (IRS) issues National and Leswer the questions in lines 6-15. To find the IRS started in IRS st	ndards, go online vailable at the bar of your actual expension not deduct any a	using the link speci nkruptcy clerk's officense. In later parts of mounts that you subti	fied in the sep ce. the form, you w racted fro yours	vill use some of spouse's	
If you	r expenses differ from month to month, enter the average	ie expense.				
•	ever this part of the from refers to you, it means both yo	•	if Column B of Form	122A-1 is filled	lin	
********		a ana your opouco		7227 T 10 IIII 0 0		
5. <b>1</b>	The number of people used in determining your ded	uctions from inco	me			
p	Fill in the number of people who could be claimed as explus the number of any additional dependents whom you he number of people in your household.				1	
Natio	nal Standards You must use the IRS Nationa	I Standards to answ	ver the questions in li	nes 6-7.		
7. <b>(</b>	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the number he dollar amount for out-of-pocket health care. The number open who are 65 or older-because older people have higher than this IRS amount, you may deduct the additional contents.	other items.  Her of people you enter of people is span a higher IRS allow.	ntered in line 5 and th lit into two categories ance for health care o	e IRS National people who a	re under 65 and	715.00
Peop	le who are under 65 years of age					
7	7a. Out-of-pocket health care allowance per person	\$56.00	_			
7	7b. Number of people who are under 65	X 1				
7	7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$ 56.00	Copy here=	<b>=&gt;</b> \$	56.00	
Peop	le who are 65 years of age or older					
7	7d. Out-of-pocket health care allowance per person	\$ 125.00	_			
7	7e. Number of people who are 65 or older	X0				
7	7f. <b>Subtotal.</b> Multiply line 7d by line 7e.	\$0.00	Copy here=	=> +\$	0.00	
7	7g. T <b>otal.</b> Add line 7c and line 7f		\$56.00	Copy to	tal here=> \$	56.00

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Debtor 1 James J Shivey Case number (if known)

**Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S.	Trustee Program has divided the IRS Local Standard for housing for
bankruptcy purposes into two parts:	•

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

9. Housing and utilities - Mortgage or rent expenses:

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment
Midland Mtg/midfirst	\$ 1,444.00

		Copy			Repeat this
Total average monthly payment	\$ 1,444.00	here=>	-\$	1,444.00	amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage	_	220.00	Сору	000.00
or rent expense). If this amount is less than \$0, enter \$0	\$	326.00	here=> \$	326.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Explain why:

- 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.
  - ☐ 0. Go to line 14.
  - 1. Go to line 12.
  - 2 or more. Go to line 12.
- 12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

  319.00

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Debtor 1	James J Shivey		Case r	number	(if knov	wn)		
	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.							
Vel	Describe Vehicle 1:							
13a.	Ownership or leasing costs using IRS Local Standard		;	\$		0.00		
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.							
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.		at					
	Name of each creditor for Vehicle 1	Average monthly payment						
	-NONE-	\$						
	Total Average Monthly Payment	\$0.00	Cop	y e =>	-\$_	0	Repeat this amount on line 33b.	
	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0,  nicle 2  Describe Vehicle 2:	, enter \$0.		\$		0.00	Copy net Vehicle 1 expense here => \$	0.00
13d.	Ownership or leasing costs using IRS Local Standard		;	\$		0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not include costs for	or					
	Name of each creditor for Vehicle 2	Average monthly payment						
		\$						
	Total Average Monthly Payment	\$	Cop here =>			0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$0,	, enter \$0		\$		0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles in Transportation expense allowance regardless of whether you			Stand	ards,	fill in the	Public \$	0.00
	<b>Additional public transportation expense:</b> If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Transp</i>	hat you believe is the a						224.00

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Debtor 1 James J Shivey Case number (if known)

er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses	<b>(</b>	
	the following IRS categories.	TOr	
self-employment taxes, soci your pay for these taxes. Ho	al security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12		
Do not include real estate, s	ales, or use taxes.	\$	1,444.99
Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
filing together, include paym	nents that you make for your spouse's term life insurance. Do not include premiums for life	\$	0.00
Do not include payments or	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
_			
, ,	•	\$	250.00
Childcare: The total month	y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
Do not include payments for	any elementary or secondary school education.	\$	0.00
that is required for the healt	h and welfare of you or your dependents and that is not reimbursed by insurance or paid		
Payments for health insurar	nce or health savings accounts should be listed only in line 25.	\$	0.00
for you and your dependent phone service, to the extent	s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of		
		+\$	500.00
Add all of the expenses al Add lines 6 through 23.	lowed under the IRS expense allowances.	\$	4,393.99
	self-employment taxes, soci your pay for these taxes. Ho and subtract that number from Do not include real estate, so involuntary deductions: To contributions, union dues, and Do not include amounts that Life Insurance: The total modifiling together, include payminsurance on your dependent term.  Court-ordered payments: administrative agency, such Do not include payments on the substitution of the contribution of the extention of the extention of the contribution of the extention of the e	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.  Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.  Education: The total monthly amount that you pay for education that is either required:  as a condition for your job, or  for your physically or mentally challenged dependent child if no public education is available for similar services.  Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.  Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  Payments for health insurance or health savings accounts should be listed only in line 25.  Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  Do not include real estate, sales, or use taxes.  Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.  Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.  Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.  Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.  Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.  Education: The total monthly amount that you pay for education that is either required:  as a condition for your job, or  for your physically or mentally challenged dependent child if no public education is available for similar services.  Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.  Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in lin

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Debtor 1 James J Shivey Case number (if known)

Add	Additional Expense Deductions These are additional deductions allowed by the Means Test.						
	Note: Do not include any expense allowances listed in lines 6-24.						
25.	5. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.						
	Health insurance	\$0.00_					
	Disability insurance	\$0.00					
	Health savings account	+ \$ 0.00					
	Total	\$	Copy total here=>	\$	0.00		
	Do you actually spend this total amount?						
	No. How much do you actually spend?						
	Yes	\$					
26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C.§ 529A(b).							
27.	<b>Protection against family violence.</b> The reasonably resafety of you and your family under the Family Violence	, , ,	•				
	By law, the court must keep the nature of these expens	ses confidential.		\$	0.00		
28.	Additional home energy costs. Your home energy coline 8.	osts are included in your i	insurance and operating expenses on				
	If you believe that you have home energy costs that are 8, then fill in the excess amount of home energy costs.		ergy costs included in expenses on line				
	You must give your case trustee documentation of you amount claimed is reasonable and necessary.	r actual expenses, and ye	ou must show that the additional	\$	0.00		
29.	<b>Education expenses for dependent children who a</b> r \$170.83* per child) that you pay for your dependent ch public elementary or secondary school.						
	You must give your case trustee documentation of you claimed is reasonable and necessary and not already a						
	* Subject to adjustment on 4/01/22, and every 3 years	after that for cases begur	n on or after the date of adjustment.	\$	0.00		
30.	<b>Additional food and clothing expense.</b> The monthly higher than the combined food and clothing allowances than 5% of the food and clothing allowances in the IRS	s in the IRS National Star					
	To find a chart showing the maximum additional allowal instructions for this form. This chart may also be availa						
	You must show that the additional amount claimed is re	easonable and necessary	<i>/</i> .	\$	24.00		
31.	<b>Continuing charitable contributions.</b> The amount that instruments to a religious or charitable organization. 26		ntribute in the form of cash or financial	+\$	150.00		
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	324.00		

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Debtor 1 James J Shivey Case number (if known)

Dedu						
	ctions for Debt Payment					
Io Te	eans, and other secured debt, fill in lire or calculate the total average monthly pa	yment, add all amounts that are contractually				
CI	reditor in the 60 months after you file for Mortgages on your home:	bankruptcy. Then divide by 60.				rerage monthly
33a.	Copy line 9b here			=>	\$	1,444.00
	Loans on your first two vehicles:				=	,
33b.				=>	\$	0.00
33c.					\$	0.00
33d.	List other secured debts:				-	
Name	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes or insurance?		
				□ No		
	-NONE-			☐ Yes	\$	
					Ψ_	
				□ No		
				Yes	\$	
				□ No		
				☐ Yes	+\$	
					•Ψ -	
					Сору	
33e.	Total average monthly payment. Add li	nes 33a through 33d	\$_	1 111 00	total here=>	\$1,444.00
34. <b>A</b> <b>o</b> l	re any debts that you listed in line 33 rother property necessary for your sell. No. Go to line 35.  Yes. State any amount that you mus	secured by your primary residence, a vehi upport or the support of your dependents? t pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i> )	cle,	1 111 00		\$ 1,444.00
34. <b>A</b> o ■	re any debts that you listed in line 33 rother property necessary for your start No. Go to line 35.  1 Yes. State any amount that you mus listed in line 33, to keep posses	secured by your primary residence, a vehi upport or the support of your dependents? t pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i> )	cle,	1 111 00		\$ 1,444.00
34. <b>A</b> o □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	re any debts that you listed in line 33 rother property necessary for your set.  No. Go to line 35.  Yes. State any amount that you mus listed in line 33, to keep posses Next, divide by 60 and fill in the	secured by your primary residence, a vehicupport or the support of your dependents?  It pay to a creditor, in addition to the payments sion of your property (called the cure amount, information below.	cle,	Total cure amount		Monthly cure
34. <b>A</b> o □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	re any debts that you listed in line 33 rother property necessary for your set.  No. Go to line 35.  Yes. State any amount that you mus listed in line 33, to keep posses Next, divide by 60 and fill in the	secured by your primary residence, a vehicupport or the support of your dependents?  t pay to a creditor, in addition to the payments sion of your property (called the cure amount, information below.  Identify property that secures the debt	cle,	1,444.00  Total cure amount	here=>	Monthly cure amount
34. A on □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	re any debts that you listed in line 33 rother property necessary for your set.  No. Go to line 35.  Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor.  NE-	secured by your primary residence, a vehicupport or the support of your dependents?  It pay to a creditor, in addition to the payments sion of your property (called the cure amount information below.  Identify property that secures the debt  Total	cle,	1,444.00  Total cure amount	here=> $60 = $$ Copy total	Monthly cure amount
Nam -NC	re any debts that you listed in line 33 rother property necessary for your set.  No. Go to line 35.  Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor.  ONE-  o you owe any priority claims such as re past due as of the filing date of your No. Go to line 36.	secured by your primary residence, a vehicupport or the support of your dependents?  It pay to a creditor, in addition to the payments sion of your property (called the cure amount information below.  Identify property that secures the debt  Total sa priority tax, child support, or alimony are bankruptcy case? 11 U.S.C. § 507.	al \$_	1,444.00  Total cure amount	here=> $60 = $$ Copy total	Monthly cure amount
Nam -NC	re any debts that you listed in line 33 rother property necessary for your set.  No. Go to line 35.  Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor.  ONE-  o you owe any priority claims such as re past due as of the filing date of your No. Go to line 36.	secured by your primary residence, a vehicupport or the support of your dependents?  It pay to a creditor, in addition to the payments sion of your property (called the cure amount information below.  Identify property that secures the debt  Total sa priority tax, child support, or alimony are bankruptcy case? 11 U.S.C. § 507.	al \$_	1,444.00  Total cure amount	here=> $60 = $$ Copy total	Monthly cure amount

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Debtor 1	Jame	es J Shivey			Case	e nı	ımber ( <i>if known</i>	)				_
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Bas</i> ns for this form. <i>Bankruptcy Basics</i> may also be availab	sics spe									
ı	No.	Go to line 37.										
	_	Fill in the following information.										
		Projected monthly plan payment if you were filing under	er Chapt	ter 13		\$_						
		Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	istricts i	n Alab	stees	X						
		To find a list of district multipliers that includes your distinct the link specified in the separate instructions for this fobe available at the bankruptcy clerk's office.							Copy to	otal		
		Average monthly administrative expense if you were fil	ling und	er Cha	apter 13		\$		here=>	\$		
37.		of the deductions for debt payment. s 33e through 36.				L				\$	1,444.00	
Tota	l Deduc	tions from Income										
38. <b>/</b>	Add all o	f the allowed deductions.										
		e 24, All of the expenses allowed under IRS e allowances	\$		4,393.99	)						
	•	e 32, All of the additional expense deductions	\$		324.00	_						
	Copy lin	e 37, All of the deductions for debt payment	+\$_		1,444.00	_    -	٦					
		Total deductions	\$_		6,161.99	)	Copy total	here	=>	\$	6,161.	99
Part 3:	Det	ermine Whether There is a Presumption of Abuse										
39. <b>C</b>	Calculate	e monthly disposable income for 60 months										
	39a. Co	py line 4, adjusted current monthly income	\$_		6,263.14							
	39b. Co	py line 38, Total deductions	- \$		6,161.99	)_						
		nthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$_		101.15	<u> </u>	Copy here=>\$		1	01.15		
	For the	next 60 months (5 years)					_	x 60				
		(* )						]				
	39d. <b>To</b>	tal. Multiply line 39c by 60		39d.	\$	6	5,069.00	Copy here=>	.	S	6,069.00	_
40. <b>F</b>	ind out	whether there is a presumption of abuse. Check the	box tha	at appl	ies:			_				
ı	■ The I	ine 39d is less than \$8,175*. On the top of page 1 of the	nis form	, checl	k box 1, <i>The</i>	ere	is no presu	mption c	of abus	e. Go to F	Part 5.	
[		ine 39d is more than \$13,650*. On the top of page 1 of	f this for	m, ch	eck box 2, 7	Γhe	ere is a pres	umption	of abu	se. You m	nay fill out	
Γ	_	ine 39d is at least \$8,175*, but not more than \$13,650	<b>0*.</b> Go to	o line	41.							
		to adjustment on 4/01/22, and every 3 years after that for				ne	date of adju	stment.				
							, .					

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Debtor 1	Jam	es J Shivey Ca	ase number (if known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	\$x .25	]	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(I)	\$	Copy here=>	\$
		Multiply line 41a by 0.25			
25	% of y	ne whether the income you have left over after subtracting all allowed ded your unsecured, nonpriority debt. e box that applies:	uctions is enough to pa	у	
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check box 1, <i>There</i> Part 5.	e is no presumption of ab	use.	
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this form, check <i>umption of abuse.</i> You may fill out Part 4 if you claim special circumstances. The			
Part 4:	Giv	ve Details About Special Circumstances			
		ve any special circumstances that justify additional expenses or adjustment	nts of current monthly i	ncome fo	or which there is no
reaso	onabie	e alternative? 11 U.S.C. § 707(b)(2)(B).			
■ N	o. Go	to Part 5.			
□ Y		I in the following information. All figures should reflect your average monthly exp m. You may include expenses you listed in line 25.	ense or income adjustme	ent for ea	ach
	ne	ou must give a detailed explanation of the special circumstances that make the ecessary and reasonable. You must also give your case trustee documentation cipustments.			
	G		verage monthly expens	e	
			\$	_	
			\$		
			\$		
			\$		
2 m 5		P.J.		_	
Part 5:	_	In Below  gning here, I declare under penalty of perjury that the information on this statem	ent and in any attachmen	ite ie true	and correct
			ent and in any attachmen	its is true	and correct.
	Ja	/ James J Shivey Imes J Shivey			
Do		gnature of Debtor 1			
υa		Inuary 21, 2021 M / DD / YYYY			

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
<u>+</u> \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 21-10469-KCF Doc 1 Filed 01/21/21 Entered 01/21/21 08:51:00 Desc Main Document Page 59 of 63

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**District of New Jersey

In re	James J Shivey	·	Case No	) <b>.</b>	
	-	Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	IPENSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptcy.	, or agreed to be pa	id to me, for services r	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have rece	ived	\$	1,500.00	
	Balance Due		\$	0.00	
2.	\$ of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed	compensation with any other person	unless they are me	mbers and associates of	of my law firm.
	☐ I have agreed to share the above-disclosed com- copy of the agreement, together with a list of the				law firm. A
5.	In return for the above-disclosed fee, I have agreed	l to render legal service for all aspect	ts of the bankruptcy	case, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and</li><li>b. Preparation and filing of any petition, schedules</li><li>c. Representation of the debtor at the meeting of c</li><li>d. [Other provisions as needed]</li></ul>	s, statement of affairs and plan which	n may be required;	-	kruptcy;
7.	By agreement with the debtor(s), the above-disclos	ed fee does not include the following	g service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement rankruptcy proceeding.	of any agreement or arrangement for	r payment to me for	representation of the	debtor(s) in
J	anuary 21, 2021	/s/ Yakov Rudikh	(		
$\overline{L}$	ate	Yakov Rudikh 00			<u> </u>
		Signature of Attorne Rudikh & Associ	-		
		223 Route 18 Sou	uth, Suite 204		
		East Brunswick,		22	
		(732) 659-6961 F rudikhlawgroup@		<b>44</b>	

Name of law firm

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## **United States Bankruptcy Court**District of New Jersey

		<b>District of New Jersey</b>		
In re	James J Shivey		Case No.	
		Debtor(s)	Chapter	7
	VEI	RIFICATION OF CREDITOR M	IATRIX	
Γhe ab	ove-named Debtor hereby verifie	es that the attached list of creditors is true and cor	rect to the best	of his/her knowledge.
Date:	January 21, 2021	/s/ James J Shivey James J Shivey		

Signature of Debtor

Capital One 15000 Capital One Dr Richmond, VA 23238

Commonwealth Financial 245 Main Street Scranton, PA 18519

Financial Recoveries 200 East Park Drive Mount Laurel, NJ 08054

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101

Internal Revenue Service 44 South Clinton Ave. Trenton, NJ 08601

Internal Revenue Service P.O. Box 9052 Andover, MA 01810

Jefferson Capital Syst 16 Mcleland Rd Saint Cloud, MN 56303

KML Law Group P.C. 216 Haddon Ave. Suite 406 Collingswood, NJ 08108

Lvnv Funding Llc Po Box 10497 Greenville, SC 29603

McGovern Legal Services LLC 850 Carolier Lane North Brunswick, NJ 08902

Middlesex County Chancery Division P.O. Box 971 Trenton, NJ 08625

Middlesex County Special Civil Part P.O. Box 1146
New Brunswick, NJ 08903-0964

MidFirst Bank 999 N.W. Grand Blvd Suite 100 Oklahoma City, OK 73118

Midland Mtg/midfirst Pob 268959 Oklahoma City, OK 73126

Motion Federal Credit Union PO Box 1160 Linden, NJ 07036

Motion Federal Cu 360 N Wood Ave Linden, NJ 07036

New Jersey Division of Taxation P.O. Box 046 Trenton, NJ 08646

North Brunswick Township 710 Hermann Rd North Brunswick, NJ 08902

Pressler, Felt, & Warshaw, LLP 7 Entin Rd Parsippany, NJ 07054

Princeton Orthopaedic PO Box 45702 Baltimore, MD 21297

PSE&G PO BOX 14444 New Brunswick, NJ 08906-4444

Resurgent Capital Services 55 Beattie Place Ste 110 Greenville, SC 29601 Society Hill North Condo Association Inc 1 Society Hill Way North Brunswick, NJ 08902

Stephen Einstein and Associates, P.C. 39 Broadway Suite 1250 New York, NY 10006

Tromberg, Morris, Poulin, PLLC 39 Broadway Suite 1250 New York, NY 10006

Wells Fargo 101 North Phillips Avenue Sioux Falls, SD 57104